

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO. 10617895 FILING DATE

APPLICANT(S)

1-12-06

11-9-06

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1		1		1	
2	1				1	
3	1				1	
4	1				1	
5	2				1	
6	1				1	
7	1				1	
8	2		2		1	
9	1				1	
10	1				1	
11	1		1		1	
12	1				1	
13	1				1	
14			1		1	
15					1	
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TOTAL IND.	5	1	7	1	7	
TOTAL DEP.	12		12		19	
TOTAL CLAIMS	17		19		26	

IND	DEP	IND	DEP	IND	DEP
51					
52					
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TOTAL IND.

1

TOTAL DEP.

1

TOTAL CLAIMS

1

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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